

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 9
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee Staples			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">09 / 09 / 2015</div>		
Mailing Address US Route 1			Amount <div style="border: 1px solid black; padding: 2px;">32.66</div>		
City Alexandria		State VA	Zip Code 22314-0000		Transaction ID : EEB074DA57EE343B486D
Purpose of Expenditure IE-Stutzman-Postage		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">09 / 17 / 2015</div>	
Name of Federal Candidate Marlin Stutzman			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: IN		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">45267.47</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">09 / 12 / 2015</div>		
Mailing Address PO Box 388			Amount <div style="border: 1px solid black; padding: 2px;">44.50</div>		
City Alexandria		State VA	Zip Code 22313-0388		Transaction ID : EE033A0234BC04A0A94E
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">09 / 12 / 2015</div>	
Name of Federal Candidate Marlin Stutzman			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: IN		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">45311.97</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;">77.16</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Paul Kilgore</i>			Date <div style="border: 1px solid black; padding: 2px;">12 / 01 / 2015</div> <div style="text-align: center;">[Electronically Filed]</div>		

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 19 / 2015		
Mailing Address PO Box 388			Amount 4.75		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EEE49FFF459D7476398D		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 19 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		45316.72	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2015		
Mailing Address PO Box 388			Amount 283.25		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E49EE07CB86F24B9A9DA		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 26 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		45599.97	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	288.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2015		
Mailing Address PO Box 388			Amount 594.70		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E91818EA4FF804AC6A0E		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		46194.67	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 03 / 2015		
Mailing Address PO Box 388			Amount 36.75		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E38875560033F4BEFAB7		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		46231.42	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	631.45
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2015	
Mailing Address PO Box 388		Amount 3.50	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EE0DE73E9104F41B2B3E Date of Disbursement or Obligation MM / DD / YYYY 10 / 10 / 2015
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		46234.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2015	
Mailing Address PO Box 388		Amount 9.00	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E2C65910510154985B4C Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2015
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		46243.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2015	
Mailing Address PO Box 388		Amount 287.25	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E6EF5C681697148EEADD Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2015
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		46531.17	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2015	
Mailing Address PO Box 388		Amount 4.75	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E914B6B4B5720435489D Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		46535.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	292.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 07 / 2015		
Mailing Address PO Box 388			Amount 30.00		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E7528E1A3B12640759AC		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		46565.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015		
Mailing Address PO Box 388			Amount 20.00		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : EEB2365DD2794470285C		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 14 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		46585.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 21 / 2015		
Mailing Address PO Box 388			Amount 60.25		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E9B5EAD0FFC1E4350B68		
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 21 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		46646.17	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee U.S. Postal Service			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015		
Mailing Address 475 Lenfant Plz SW			Amount 327.90		
City Washington	State DC	Zip Code 20260-0004	Transaction ID : E3F5C6486C6C346D38F3		
Purpose of Expenditure IE-Stutzman-Postage		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 24 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		47111.74	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	388.15
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼ C C00448696	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Staples			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 27 / 2015		
Mailing Address US Route 1			Amount 137.67		
City Alexandria	State VA	Zip Code 22314-0000	Transaction ID : EC8A3A918E2D745F6A06		
Purpose of Expenditure IE-Stutzman-Printing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 24 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		47111.74	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Envision Printers/Marketing			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015		
Mailing Address 2 Riverbend Pkwy			Amount 13931.79		
City Leesburg	State VA	Zip Code 20176-0000	Transaction ID : EDDB15F18D3EF40FD9DC		
Purpose of Expenditure IE-Stutzman-Direct Mail Production		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 01 / 2015		
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		61052.53	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14069.46
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 30 / 2015	
Mailing Address PO Box 388		Amount 9.00	
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E1E599947C8134404AB0 Date of Disbursement or Obligation MM / DD / YYYY 11 / 30 / 2015
Purpose of Expenditure IE-Stutzman-Donation Processing		Category/Type	
Name of Federal Candidate Marlin Stutzman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 61052.53		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	15817.72

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